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| KANATA, ON K2M 2E9 | | | | Viotoria 1 | Victoria Donnelly (Depositor's numbe) | | |
| 12/16/2005 TBESHAH2 00000066 501832 09990366 | | | | VICTOLIA I | Victoria Donnelly (Signance) | | |
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| | | | Wen Li | <u> </u> | TR-005 | 2065 | |
| 09/990,366 11/23/2001 WEST LINE TO SYSTEM FOR MONITORING PERFORMANCE OF OPTICAL NETWORK | | | | | | | |
| TITLE OF INVENTION: M | ELHOD WAD 2121 PW LC | K MON TOKETO | I LIG ORMIZ | 02010111 | | | |
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| | | ISSUE F | 5¢ | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE | |
| APPLN. TYPE | SMALL ENTITY | | | \$300 | \$1000 | 02/22/2006 | |
| nonprovisional | YES | \$700 | | \$300 | | | |
| EXAMINER | | ART UNIT | | CLASS-SUBCLASS | | | |
| KIM, DAVID S | | 2633 | | 398-013000 | | _ | |
| I Change of correspondence | e address or indication of "F | ee Address" (37 | 2. For printin | g on the patrut from page | , list | | |
| CFR 1.363). (1) the names of up to 3 registered patent attorneys Victoria Bonne I.1 | | | | | | | |
| Change of correspond Address form PTO/SB/1 | Correspondence | or agents OR, alternatively, (2) the name of a single firm (having as a member a 2 | | | | | |
| The Address indica | nion form | registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3 | | | | | |
| PTO/SB/47; Rev 03-02 Number is required. | e of a Customer | listed, no name will be printed. | | | | | |
| • | RESIDENCE DATA TO E | E PRINTED ON | THE PATENT (| print or type) | | | |
| 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment. | | | | | | | |
| recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment, | | | | | | | |
| (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) | | | | | | | |
| TROPIC NETV | VORKS INC. | Ka | anata, C | ntario, CAN | ADA | | |
| | | | | | _ | _ | |
| Please check the appropriat | e assignce category or catego | ories (will not be pr | rinted on the pate | ent): 🔲 Individual 🛎 | Corporation or other private g | group entity U Government | |
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| XX Issue Fee | | | A check in the amount of the fee(s) is enclosed. | | | | |
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| 5 Change in Entity Status | (from status indicated abov | c) | | | | | |
| XX a. Applicant claims | MALL ENTITY status. See | 37 CFR 1.27. | | | MALL ENTITY status. Sec 37 | | |
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| | | - | The I | | | | |
| Authorized Signature | Victoria Don | nelly | | · | Dec 15, 2005 | | |
| Typed or printed name \(\) | | Registrat | tion No. 44,185 | | | | |
| Typed or printed name Victoria Donnelly Registration No. 44, 100 This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, an submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent in Information Officer, U.S. Parent and Trademark Office, U.S. Department of Commerce, I.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450. | | | | | | | |
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